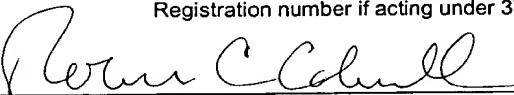




<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 16869C-017000US
<b>FY 2005</b> (fees effective on or after October 1, 2004)		
Application Number 09/747,824		Filed December 22, 2000
For ASSEMBLY LANGUAGE CODE COMPILED FOR AN INSTRUCTION-SET ARCHITECTURE CONTAINING NEW INSTRUCTIONS USING THE PRIOR ASSEMBLER		
Art Unit 2124		Examiner Qamrun Nahar
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55 \$ 110 _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215 \$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490 \$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765 \$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040 \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.		
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the	<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>27,431</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.	
 Signature		<u>October 29, 2004</u> Date
<u>Robert C. Colwell, Reg. No. 27,431</u> Typed or printed name		<u>650-326-2400</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

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